Corm	990-T	E	empt Organization ((and proxy tax	Bus	iness Inco	ome -	Tax Rety	rn [ОМІ	B No 1545-0687
TOITI		Far asia	diliu ploxy tax ndar year 2017 or other tax year begini	uiii	07/01 2017	ord order	1000000000000000000000000000000000000	2018	0	Ე ⋒ 17
		For cale	Go to www.irs gov/Form990					20	2	<u> </u>
	ment of the Treasury Revenue Service	▶ Do	not enter SSN numbers on this form a					(0)(3)	Open to	Public Inspection for 3) Organizations Only
A	Check box if	P 50			ne changed and see i					ification number
	address changed				Ū		•	(Emplo	oyees' trust,	see instructions)
_	mpt under section	D-:4	EMMANUEL COLLEGE					٠,, ١		^
X	501(Q() 3)	Print or	Number, street, and room or suite no I	faPO	box, see instructions				10576	
\vdash	408(e) 220(e)	Туре	400 ==== ======						ated busi istructions)	ness activity codes
\vdash	408A530(a)		400 THE FENWAY		WD (4		
_	529(a)		City or town, state or province, country	, and z	IP or toreign postal co	ode		5259	0.0	
	k value of all assets nd of year	F Gro	BOSTON, MA 02115 up exemption number (See instruction	\				1 3233	 	
ΔΔ	5,147,036.		eck organization type X 501			501(c)	truct	401(a)	truet	Other trust
			rimary unrelated business activity					401(a)	tiust	Other trust
			corporation a subsidiary in an affili					?	•	Yes X No
			identifying number of the parent cor	_		osidiai y c	ontrolled group		1	
J Th	e books are in care	e of ►	SISTER ANNE M DONOVAN	SND		Felephon	e number ▶ 6	17-735	-9822	
Par			or Business Income		(A) Income		(B) Expe		Τ	(C) Net
					`					
b	Less returns and allowa			1c		-				
2			ule A, line 7)	2						1
3	_		2 from line 1c	3						_
` 4a	Capital gain net ii	ncome (a	attach Schedule D)	4a						
b			Part II, line 17) (attach Form 4797).	4b						
С	Capital loss dedu	ction for	trusts	4c						
5	Income (loss) from	partnershi	ps and S corporations (attach statement)	5						<u> </u>
6	Rent income (Sch	edule C)		6						
7	Unrelated debt-fir	nanced in	come (Schedule E)	7	273,	431.	8	80,183	•	-606,752.
8	Interest, annuities, royal	lties, and re	nts from controlled organizations (Schedule F)	8						
9	Investment income of a	section 50	1(c)(7), (9), or (17) organization (Schedule G)	9						
10	•		ncome (Schedule I)	10						
11			dule J)	11	0.5	126	7 mo!!			05 126
12	•		ctions, attach schedule)	12		136.	ATCH	<u>l</u> 80,183	-	85,136. -521,616.
13			ough 12	13		567.				
Par			Taken Elsewhere (See instr					(Except	ioi con	indutions,
			t be directly connected with t			iss inco	me)	144		
14			directors, and trustees (Schedule K)		L.					
15	Salaries and wage	tononoo				KEUL		<u>15</u>	 	
16 17	Rad debts	terrance						ij <u>17</u>		
18	Interest (attach so	hedule)			· · · · } ` · · ·	VIAY 🕱	3 / U (3)			
19								2 19		
20			See instructions for limitation rules)			GDE	N. LIT.		-	
21			4562)				., 0,			
22			on Schedule A and elsewhere on re			а		22b		
23	Depletion							23		
24			compensation plans							
25	Employee benefit	program	s , , , , , , , , ,					25		
26	Excess exempt ex	φenses (Schedule I)					26		
27	Excess readership	costs (S	Schedule J)					27	_	
28		-	schedule)							
29			es 14 through 28							E01 (1)
30			ole income before net operating							-521,616.
31			ion (limited to the amount on line 30	•						E01 (1)
32			e income before specific deduction					_		-521,616.
33	•	•	rally \$1,000, but see line 33 instruc							1,000.
34			ible income Subtract line 33 fr			_	رم الم ^ا			-521,616.
For 5			r line 32				· · · · · · · · · /	.7. 34		Form 990-T (2017)
7X274	⁰ ² 1591 IV 15A	92	todoo, ooo modaadaa.				629370	·		PAGE

Par	t III	Tax Computation					
35	•	zations Taxable as Corporations. Se		utation Controlled gr	oup		
	member	s (sections 1561 and 1563) check here ▶ [See instructions and				
а	Enter yo	our share of the \$50,000, \$25,000, and \$	9,925,000 taxable income bra	ickets (in that order)			
	(1) \$	(2)	(3)[\$				
b	Enter or	ganization's share of (1) Additional 5% tax (not	more than \$11,750)	. \$			
	(2) Addi	tional 3% tax (not more than \$100,000)		. \$			
c	Income	tax on the amount on line 34			▶ 35c		
36	Trusts	Taxable at Trust Rates See in:	structions for tax comput	tation Income tax	on		
	the amo	unt on line 34 from Tax rate schedule o	r Schedule D (Form 10-	41)	▶ 36		
37	Proxy ta	x See instructions			▶ 37		
38		ive minimum tax					
39	Tax on	Non-Compliant Facility Income. See instruction	s		39		
40	Total A	dd lines 37, 38 and 39 to line 35c or 36, which	never applies	<u> </u>	40		.
_		Tax and Payments			i ,		
41 a	Foreign	tax credit (corporations attach Form 1118, trus	sts attach Form 1116) 🗠	41a			
b	Other cr	redits (see instructions)		4 <u>1</u> b			
С	General	business credit Attach Form 3800 (see instruc	tions)	41/c			
d	Credit fo	or prior year minimum tax (attach Form 8801 o	r 8827)	41 <mark>d </mark>			
е	Total cr	edits Add lines 41a through 41d			41e		
42		t line 41e from line 40					
43		es Check if from Form 4255 Form 8611					
44	Total ta	x Add lines 42 and 43			44		0.
45 a	Paymen	ts A 2016 overpayment credited to 2017 $$. $$.		45a			
b	2017 es	timated tax payments		45b			
С		osited with Form 8868					
		organizations Tax paid or withheld at source (s					
е		withholding (see instructions)					
f		or small employer health insurance premiums (451			
g			439				
			Total ▶	•	46		
46	-	syments Add lines 45a through 45g					
47		ed tax penalty (see instructions) Check if Form			-		
48		If line 46 is less than the total of lines 44 and					
49		ment. If line 46 is larger than the total of lines			▶ 49 ed ▶ 50		
50 Par		samount of line 49 you want Credited to 2018 est			- 1 		
51		time during the 2017 calendar year, did				authority	Yes No
31	-	financial account (bank, securities, or other					100
		Form 114, Report of Foreign Bank and	,	· · ·	=		
	here ▶	Tom 114, Report of Foreign Bank and	i mandai 7.000unts ii 120,	criter the name of	the following.		X
E 2		he tax year, did the organization receive a dist	rebution from or was it the gran	tor of or transferor to	a foreign trust		X
52	-	ne tax year, did the organization receive a dist ee instructions for other forms the organization		tor or, or transferor to, a	a roreign nusi		1 - 1
53	•	e amount of tax-exempt interest received or ac					
55	Un	der penalties of penjury, I declare that I have examined	this return, including accompanying schi		o the best of m	y knowledge a	nd belief, it is
Sigi	n tru	e, correct, and complete Declaration of preparer (other than to	axpayer) is based on all information of whice	h preparer has any knowledge		100 1::	45 ·
Her		So Anne M. Sonoran	15/15/19 PCFO	Tressurer		IRS discuss preparer sho	
		gnature of officer	Date Title		(see instruction		
	<u> </u>	Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
Paid		JACOB K JOHNSON	Jose Johnson	05/15/2019	self-employed	1 50176	3226
	oarer	Firm's name ► KPMG LLP	y			13-55652	207
Use	Only	Firm's address ▶ 60 SOUTH STREET, I	BOSTON, MA 02111			617-988-	
_						- 00	A T

Form **990-T** (2017)

Form 990-T (2017)									1	Page 3
Schedule A - Cost of Go	oods Sold. Er	nter method	d of invento	ory valuation	•					
1 Inventory at beginning of y	ear . 1			6 Inventor	y at end of y	ear	6			
2 Purchases	2			7 Cost o	f goods s	old. Subtract line				
3 Cost of labor	3	,		6 from	line 5	Enter here and in				
4a Additional section 263A co	osts			Part I, III	ne 2		7		,	
(attach schedule)	4a		-	8 Do the	rules of	section 263A (w	rith r	espect to	Yes	No
b Other costs (attach schedu	le) . 4b				•	or acquired for				
5 Total Add lines 1 through								<u></u>		Х
Schedule C - Rent Income	e (From Real P	roperty a	nd Perso	nal Propert	y Leased	With Real Proper	rty)			
(see instructions)										
1 Description of property										
(1)										
(2)										
(3)			_							
(4)										
	2 Rent rece	ved or accru	ed			_				
(a) From personal property (if the for personal property is more th more than 50%)	an 10% but not	percent	age of rent fo	personal proper r personal proper based on profit	rty exceeds	3(a) Deductions d in columns 2(ome
(1)										
(2)										
(3)										
(4)										
Total	**	Total								
(c) Total income Add totals of co	` '					(b) Total deduction Enter here and or Part I, line 6, colur	page '			
Schedule E - Unrelated De			ee instructi	ons)		· · · · · · · · · · · · · · · · · · ·				
			2 Gross	income from or	3	Deductions directly condebt-finance			ole to	
1 Description of deb	ot-financed property			to debt-financed roperty		ght line depreciation tach schedule)	((b) Other dedi (attach sche		
(1) ATTACHMENT 2										
(2)										
(3)			<u> </u>			<u> </u>				
(4)					<u> </u>					
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adju- of or alloca debt-financed (attach sch	ible to property	4	Column divided column 5		s income reportable mn 2 x column 6)		Aliocable de umn 6 x total 3(a) and 3	of colum	
(1)				(%					
(2)				(%					
(3)					%					
(4)					%					
						ere and on page 1, line 7, column (A)		er here and o t I, line 7, co		

Form **990-T** (2017)

880,183.

Total dividends-received deductions included in column 8

273,431.

Form 990-T (2017) +	EMMANUEL										105769 Page 4
Schedule F - Interest, Ann	uities, Royalties	·				_=	zati	ons (see	instruction	ons)	
1 Name of controlled organization	2 Employer identification numb	er :	3 Net	t Controlled Currelated income (see instructions)	4 Tota	tions at of spec nents ma		ıncluded	f column 4 the sont of the control o	olling	6 Deductions directly connected with income in column 5
(1)					_						
(2)			_		_						
(3)											
(4) Nonexempt Controlled Organi	zations										_
7. Taxable Income	8 Net unrelated in (loss) (see instruct			9 Total of spec		In	clude	t of column ed in the co ation's gross	ntrolling		Deductions directly nected with income in column 10
(1)			-								
(2)											
(3)											
(4)			J	-		<u> </u>					
						E P	nter h art I,	columns 5 a nere and on , line 8, colu	page 1, mn (A)	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
Schedule G - Investment I		tion 50	11(c)	(7) (9) or (7) Ora	anizat	ion	(see inst	tructions)		
1 Description of income	2 Amount of		3 1(0)	3 Dec	uctions connected schedule)			4 Se	t-asides schedule)		5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)											
(4)	Enter here and o Part I, line 9, co		,								Enter here and on page 1 Part I, line 9, column (B)
Totals	<u> </u>	_									
Schedule I - Exploited Ex	empt Activity Inc	come, (Othe:	<u>r Than Adve</u>	rtising	<u>Incom</u>	e (s	ee instru	ictions)		·
1 Description of exploited activity	2 Gross unrelated business income from trade or business	dır conne produ	openses rectly acted wo action of related ss income	or busine 2 minus If a gain	lated trade	5 of from	n act	s income tivity that inrelated s income	6 Expe attributa colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)						′			<u> </u>		
Totals ▶	Enter here and on page 1, Part I, line 10, col (A)		ere and 1, Part), col (l	ı, l							Enter here and on page 1, Part II, line 26
Schedule J - Advertising In	ncome (see instri	uctions)				-					
Part I Income From Per	iodicals Report	ed on a	a Cor	nsolidated B	asis						
1 Name of periodical	2 Gross advertising income	•3 I adverti	Direct ising co	gain or e sts 2 minus a gain,	ertising loss) (col col 3) If compute hrough 7	5		culation ome	6 Read cos		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
<u>(1)</u>											
(2)											
(3)				<u> </u>		ļ					
(4)											•
Totals (carry to Part II, line (5))				Ì							Form 990-T (2017

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)		-				·
(4)						
Totals from Part I ▶			_			
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶			<u> </u>		_ _	<u></u>

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
1)		%	
2)		%	
3)		%	
4)		%	
otal Enter here and on page 1. Part II, line 14			

Form 990-T (2017)

THACHMENT	1	

PART I - LINE 12 - OTHER INCOME

QUALIFIED TRANSPORTATION FRINGE IRC 512(A)(7)

PART I - LINE 12 - OTHER INCOME

85,136.

85,136.

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EMMANUEL COLLEGE

SCHEDULE E - UNRELATED DEBT-FINANCED INCOME				ATTACHMENT 2				
				ଫ	S		7	8
		Ж		AVERAGE	AVERAGE	9	GROSS INCOME	ALLOCABLE
	2	DEDUCTIONS DIRE	DEDUCTIONS DIRECTLY CONNECTED	ACQUISITION	ADJUSTED	8 4 IS	REPORTABLE	DEDUCTIONS
DESCRIPTION OF DEBT-FINANCED PROPERTY	GROSS INCOME	(3A)	(3B)	DEBT	BASIS	OF 5	(2 × 6)	6 * (3A + 3B)
DEBT FINANCED INCOME FROM TAXABLE BOND	273,431		880,183	23,046,011	23,046,011 100 000	100 000	273, 431	880, 183
				TOTALS			273,431	880,183

ATTACHMENT 2 PAGE 8

629370

1591IV 1592